## **Truth in Testimony Disclosure Form**

In accordance with Rule XI, clause 2(g)(5)\*, of the Rules of the House of Representatives, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Carls a annu *44 -	Energy and Mineral Resources
Hearing Date: _	uly 24, 2019
Hearing Subject	
H.R. 934 "Hea	alth Benefits for Miners Act of 2019"
H.R. 935, "Mir	ners Pension Protection Act"
Witness Name: <u> </u>	orraine Lewis
Position/Title: <u>E</u>	xecutive Director, UMWA Health & Retirement Funds
Witness Type:	O Governmental • Non-governmental
Are you represei	nting yourself or an organization? O Self Organization
If you are repres	enting an organization, please list what entity or entities you are representing:
UMWA Health	& Retirement Funds, 1974 Pension Plan, 1993 Benefit Plan
subcontracts) rel hearing received	governmental witness, please list any federal grants or contracts (including subgrants or ated to the hearing's subject matter that you or the organization(s) you represent at this in the current calendar year and previous two calendar years. Include the source and grant or contract. If necessary, attach additional sheet(s) to provide more information.
Prepayment Plan ("HCPP	e reference to six employee benefit plans—two are pension plans and four are health plans. The four health plans are a Health Care ") under Section 1833 of the Social Security Act ("SSA") and have a contract (#90-091) with the Centers for Medicare & Medicaid Services on 1833(a)(1)(A) of the SSA.
supplies received by the t \$91.7 million from CMS fo	hysicians and supplies on a fee-for-service bases and is reimbursed 80% of the Medicare fee schedule amount for medical services and JMWA Funds' Medicare beneficiaries. For 2019, the Funds' HCPP has received an interim payment of r the period of 1/1/2019 to 7/31/2019. For calendar years 2018 and 2017, CMS reimbursed the Funds' HCPP for physician services and \$162.5 million and \$155.2 million, respectively.
government and hearing received	governmental witness, please list any contracts or payments originating with a foreign related to the hearing's subject matter that you or the organization(s) you represent at the current year and previous two calendar years. Include the amount and country of intract or payment. If necessary, attach additional sheet(s) to provide more information.